

## HEALTH PLAN OF NEVADA, INC.

### RENEWAL RATES

#### CITY OF LAS VEGAS

DATE QUOTED: AUGUST 27, 2007

RATES EFFECTIVE: JANUARY 1, 2008

#### Health and Prescription Plan

Monthly Premium For:	Current Plan with Current Rates	Renewal Plan with Renewal Rates
	HPN 10 \$5/\$25/\$45 Rx	HPN 10 \$5/\$25\$45Rx
Employee Only	\$264.68	\$277.92
Employee + One Dependent	\$510.85	\$536.40
Employee + Two or More Dependents	\$653.75	\$686.44
Percentage Increase		5%

**\*Plan Mail Order Pharmacy**

Preferred Maintenance Covered Drug: The Insured pays twice the applicable Drug Fee as outlined above, up to a 90-day Therapeutic Supply, for Preferred Generic or Brand Name Covered Drugs.

#### **STATEMENT OF QUALIFICATION**

This renewal offer is subject to change in the event that any of the information used in development is subsequently found to be materially inaccurate.